

***Labor Standards Section*****Form 10****Record of  
Employee Interview****Department of Housing  
and Urban Development  
Labor Standards OMB Approval: No. 2501-0009**

Project Number: _____	Contractor (Employer): _____
Project Name: _____	Subcontractor (Employer): _____
1. Name of Employee: _____	
2. Home Address and Zip Code: _____	
3. Last date you work on Project before today? _____	Number of hours worked on Project on that date? _____
4. Your hourly rate of pay? \$ _____	
4a. Are you currently receiving any benefits? Yes or No	
5. Your job classification(s)? _____ Apprentice? Yes or No	
6. Your Duties? _____	
7. Tools or Equipment Used? _____	
8. Paid at least time and one-half for all hours worked in excess of 40 hours per week? (If overtime premium pay is not required, enter "inapplicable") Yes or No	
9. Ever threatened, intimidated or coerced into giving up any part of pay? Yes or No	
10. Duties observed by interviewer: _____	
Conform to classification? Yes or No	
11. Remarks: (Continue on reverse side if necessary) _____	
12. Signature of Interviewer: _____ Date: _____	
13. Signature of Employee: _____ Date: _____	
<b><u>Payroll Examination</u></b>	
14. Remarks: (Continue on reverse side if necessary) _____	
15. Signature of Payroll Examiner: _____	
Date of Payroll Examination: _____	